

REGISTRATION FORM
CPCS ANNUAL TRAINING Thursday, May 5, 2005
DCU Center (formerly the Worcester Centrum Centre)
50 Foster Street
Worcester, MA 01608

TOPICS TO BE ANNOUNCED

NAME: _____

E-MAIL ADDRESS _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: (_____) _____

Please check here if a vegetarian meal is required: _____

To assist us in scheduling:

Please check here if you are **only** interested in attending Criminal Law Programs _____

Please check here if you are **only** interested in attending Children and Family Law Programs _____

Please check here if you are interested in attending **both** Family Law and Criminal Law Programs _____

TO REGISTER: Please complete the above form and return it with a \$95.00 contribution (checks only, payable to the "CPCS Training Trust") to:

CPCS Training Unit
44 Bromfield Street
Boston, MA 02108